

DO/ EO WORKSHEET

U.S. Appl. No. 10/519643

International Appl. No. CA03/01141

Application filed by : 20 months 30 months

WIPO PUBLICATION INFORMATION :

Publication No.: WO 2004/011656

Publication Language : English Japanese
 German French Other : _____

Screening Done by :

Publication Date : 05 Feb 04

Not Published : U.S. only designated EP request

INTERNATIONAL APPLICATION PAPERS IN THE APPLICATION FILE :

- International Application (*RECORD COPY*)
- Article 19 Amendments
- PCT/IB/331
- PCT/IPEA/409 IPER (PCT/IPEA/416 on front)
- Annexes to 409
- Priority Document (s) No. _____

- International Appl. on Double Sided Paper (*COPIES MADE*)
- Request form PCT/RO/101
- PCT/ISA/210 - Search Report
- Search Report References
- Other : _____

RECEIPTS FROM THE APPLICANT (*other than checked above*) :

- Basic National Fee (*or authorization to charge*)
- Description
- Claims
- Words in the Drawing Figure(s) 9
- Article 19 Amendments
 - english transl. of annexes NOT present
 - entered not entered :
 - not a page for page substitution
 - other : _____
- Annexes to 409
 - english transl. of annexes NOT present
 - entered not entered :
 - not a page for page substitution
 - other : _____

- Preliminary Amendment(s) Filed on :
1. _____ 2. _____ 3. _____
- Information Disclosure Statement(s) Filed on :
1. _____ 2. _____ 3. _____
- Assignment Document
- Power of Attorney/ Change of Address
- Substitute Specification Filed on :
1. _____ 2. _____
- Verified Small Status Statement (executed)
- Oath/ Declaration (executed)
 - surcharge was paid at the time of filing
- DNA Diskette
- Other : 1. _____ 2. _____

NOTES : I.A. used as Specification Other :

35 U.S.C. 371 - Receipt of Request (PTO-1390)

13 Jan 05

Date Acceptable Oath/ Declaration Received

04 July 05

Date of Completion of requirements under 35 U.S.C. 371

102(e) Date

Date of Completion of DO/ EO 906 - Notification of Missing 102(e) Requirements

Date of Completion of DO/ EO 907 - Notification of Acceptance for 102(e) Date

Date of Completion of DO/ EO 911 - Application Accepted Under 35 U.S.C. 111

Date of Completion of DO/ EO 905 - Notification of Missing Requirements

Date of Completion of DO/ EO 916 - Notification of Defective Response

Date of Completion of DO/ EO 903 - Notification of Acceptance

Date of Completion of DO/ EO 909 - Notification of Abandonment

BEST AVAILABLE COPY

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request: 7/12/05

2 Serial/Patent # 10/519,843

3 Please refund the following fee(s):

Filing

Amendment

Extension of Time

Notice of Appeal/Appeal

Petition

Issue

Cert of Correction/Terminal Disc.

Maintenance

Assignment

Other

4 PAPER NUMBER

1

5 DATE FILED

7/4/05

6 AMOUNT

\$ 305

7 TOTAL AMOUNT OF REFUND

\$ 305

8 TO BE REFUNDED BY:

Treasury Check

Credit Deposit A/C #:

9 1 9 -- 5 1 1 3

10 REASON:

Overpayment

Duplicate Payment

No Fee Due (Explanation):

11 REFUND REQUESTED BY:

TYPED/PRINTED NAME: A Johnson

SIGNATURE: A Johnson

OFFICE: PCT

***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****

APPROVED: _____

TITLE: paralegal
PHONE: 308-9940

DATE: _____

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance

Refund Branch

Crystal Park One, Room 802B

BEST AVAILABLE COPY

REQUEST FOR PATENT FEE REFUND

1 Date of Request: _____

2 Serial/Patent # 10/519843

3 Please refund the following fee(s):	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
Filing	1	1-13-05	\$ 50
Amendment			\$
Extension of Time			\$
Notice of Appeal/Appeal			\$
Petition			\$
Issue			\$
Cert of Correction/Terminal Disc.			\$
Maintenance			\$
Assignment			\$
Other			\$

7 TOTAL AMOUNT OF REFUND \$ 50

8 TO BE REFUNDED BY:

Treasury Check

Credit Deposit A/C #:

9 19--5113

10 REASON:

 Overpayment Duplicate Payment No Fee Due (Explanation):

11 REFUND REQUESTED BY:

TYPED/PRINTED NAME: A Johnson

TITLE: paralegal

SIGNATURE: A Johnson

PHONE: 308-9140

OFFICE: PCT

***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****

APPROVED: _____

DATE: _____

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B